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| 1. **Manager/Supervisor Section** *(to be completed by the Manager)*

**The Manager must take a copy of the passport as follows; outside cover, the page containing the passport number and country of issue, the photo page and the visa information if applicable. Please sign and date the copy and state on it “I certify that I have seen the original document and this is a true copy”. The Manager must attach the copy of the passport pages to this form.** **Please note: self-declaration form has been received by Academic Regulations Quality and Standards Office** |
| **Manager/Supervisor Name** | Lynne Barker |
| **Job Title** | Associate Director, Academic Regulations Quality and Standards |
| **School/Directorate** | Students and Education Directorate  |
| **Department** | Academic Regulations Quality and Standards |
| **Contact Telephone Number** | 020 7848 3397 |
| I confirm that the details on this form are accurate and that I have seen the **original** documentary evidence that the person named is 16 or over and has the right to work in the UK. See note above |
| **Manager’s Authorising Signature** |  |
| **Date** |  |

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| 1. **Authorisation by Human Resources**
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| **To Payroll & Pensions** The attached engagement is suitable to be paid as a One-off Fee. Documentary evidence that the person named is 16 or over and has the right to work in the UK (e.g. passport) is attached. |
| **Signed** *(HR Manager/Adviser)* | **Date** |
| **Name** *(please print name)* | **Telephone Number** |

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| 1. **One Off Payment** *(to be completed by the Manager)*
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| **Amount to Pay** | £ | **Cost Code** |  |
| **Date(s) of work** |  |
| **Description of work***(If applicable please include name of degree marked and Department)* | External Examiner for Academic Year XXXX (Assessment Sub Board XXXX) |

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| 1. **Worker’s Details** *(to be completed by the External Examiner – please complete all sections)*
 |
| **Name** *(please print name)* |  |
| **National Insurance Number** |  | **Date of Birth** |  |
| **Home Address (not work address due to change in HMRC rules)** |  |
| **Contact Telephone Number** |  |
| **E-mail Address** |  |
| **Bank Name** |   |
| **Account Name** | As above |
| **Bank Sort Code** |  |  |  | **Account Number** |  |
| **Date(s) of previous payments by KCL (in past 3 months)** | **1.** | **2.** | **3.** |

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| 1. **Auto-enrolment Postponement Notice – External Examiner’s Copy (*to be signed by the External Examiner)***
 |
| Under pensions legislation the College is obliged to automatically enrol staff whether permanent or temporary in an occupational pension scheme if they meet certain age and earning criteria. This is known as auto-enrolment. Even if the criteria for auto-enrolment are not met the employer may still have to give staff the option of joining an occupational pension scheme. For administrative purposes we are deferring your auto-enrolment to **the first day of the month in which the date three months after your commencement date falls** (the deferral date). E.g. if you start on 12 April your deferral date will be 1st July. If you are still employed by the College on the deferral date, and you are not already in one of our pension schemes, then if your salary exceeds £676 in any month thereafter and you are aged between 22 and 65 we will automatically enrol you in either the USS or SAUL pension schemes. You will have to make contributions to the Scheme in accordance with the Scheme rules by way of deduction from your pay, but the College will also make contributions on your behalf.If you are auto-enrolled but do not wish to be a member of the Scheme, then you may opt out by completing an Opt Out Notice available from the Scheme administrators within one month and get a full refund of contributions. If you opt out after one month from the date of auto-enrolment you may forfeit any contributions that have been made to the scheme.If you do not meet the criteria for auto-enrolment either because you are earning less than £676 a month or because you are younger than 22 or older than 65, you may still be eligible to join the pension scheme on request. You may also apply to join the scheme before the deferral date. For further information, please contact the Pensions team**Please sign below to acknowledge receipt of this Notice.** |
| **Signed** *(employee)* | **Date** |
| **Name** *(please print name)* |  |

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| **Signed** *(employee)* | **Date** |
| **Name** *(please print name)* |  |

***Please detach this copy and give to the employee as soon as possible after commencement of the engagement.***